## PART B - FEE(S) TRANSMITTAL

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881 STITES & HA 1199 NORTH F SUITE 900		have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
ALEXANDRIA	, VA 22314		Γ				(Depositor's name)
							(Signature)
							(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	R	ATTORN	NEY DOCKET NO.	CONFIRMATION NO.
10/583,100 06/16/2006 FITLE OF INVENTION: CONTAINER DEVICE FOR THE STORAGI		Hans Georgii	P08933US00/DEJ 1279				
APPLN. TYPE				_			
	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUI		DE FEE	TOTAL FEE(S) DUE	
nonprovisional	YES	\$720 755	\$300	\$0		\$1020	10/24/2008
EXAMINER WELLS NIKITA		ART UNIT	. 250-506100	J			
WELLS, NIKITA 2881  1. Change of correspondence address or indication of "Fee Address" (37			2. For printing on the	notant front noge li	int		
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON PLEASE NOTE: Unless an assignee is identified below, no assignee.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  10/16/2558 JHD003  THE PATENT (print or type)  O1 FC::2561  data will appear on the patent. If an assignee is dentified below, the document has been filed for				
recordation as set fort	h in 37 CFR 3.11. Comp	olletion of this form is NO	data will appear on the I a substitute for filing a	patent. If an assigi i assignment.	hee its iden	itified below, the do	ocument has been filed for
(A) NAME OF ASSI		(B) RESIDENCE: (CITY and STATE OR COUNTRY)					
OYSTER INTERNATIONAL, N.V. Curacau, Netherlands Antilles							
Please check the appropr	iate assignee category or	categories (will not be pr	inted on the patent) : [	Individual 🛚 C	orporation	or other private gro	up entity Government
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Authorized Signature		Speeher	Office.	Date 1 5		_	705.00 OP 300.00 OP
Typed or printed name	Douglas E. J	U	Registration No. 28,518				
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